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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED SECRETARY OF THE SENATE PUBLIC RECORDS

15 OCT 20 AM 11: 19

					Or Or	fice Use Ohly
NAME OF TYPE OR PRINT COMMITTEE (in full)		T ▼ Example: If typing, type over the lines.		12FE4M5		
, Gillibrand for Senate						
	<u> </u>					
	126 C Street, NV	V			<u></u>	<u></u>
ADDRESS (number and street)						
Check if different than previously reported. (ACC)	2nd Floor		<u>. i i i </u>			<u> </u>
	Washington	<u> </u>			DC 200	01
2. FEC IDENTIFICATION N	UMBER ▼	CITY ▲			STATE A	ZIP CODE
C C00413914		3. IS THIS	. NEW	ı	AMENDED	STATE ▼ DISTRIC
9 2007.0017		REPORT	X (N)	OR	(A)	NY 00
						<u> </u>
4. TYPE OF REPORT (Ch	oose One)	(b) 12-Day PR	E Flootion Don			
(a) Quarterly Reports:		(D) 12-Day FR	E -Election Repo	or the:		
April 15 Augstock 6	Popert (O1)		Primary (12P)	General (12G)	Runoff (12R)
April 15 Quarterly Report (Q1)			Convention (12C)	Special (12S)		
July 15 Quarterly F	leport (Q2)			,		
X October 15 Quarter	rly Report (Q3)	Election or	₩ % 1			in the State of
January 31 Year-En	d Report (VE)					
bandary of roar En	o ricport (TE)	c) 30-Day PO	ST-Election Rep	ort for the	:	
			General (30G)	Runoff (30R)	Special (30S)
Termination Report (TER)						in the
		Election or	1			State of
						NAME OF THE PARTY
M 07	м р р	Y Y		ы м		Y Y
i. Covering Period 07	01	2015	through	09	30	2015
certify that I have examined the		ne best of my k	nowledge and b	elief it is ti	rue, correct and cor	mplete.
ype or Print Name of Treasurer	Karen Feldman	7 0 1	taka dinaman na		APT VET PARTIES AND A	CONTRACTOR AND ADDRESS OF THE PARTY.
		[.[]]]]			* 1 <i>6</i>	D D Y Y
signature of Treasurer Kare	n Feldman	pla	NUMBER OF THE PROPERTY OF THE	1	Date	07 2015
OTE: Submission of false, errone	ous or informalete	information may	subject the serv	on cienin-	this Donort to the	
Office Office	ous, or incomplete	montation may	subject the pers	on signing	uns report to the pe	enames of 2 U.S.C. §437g.
Use	:				1	EC FORM 3
Only						(Revised 02/2003)